		_ 11	JOILININ II		(Column 2)	(Column 3)
AMENDMENT C			CLAIMS IEMAINING AFTER MENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total		17	Minus	- 20	= /
	Independent		1	Minus	3	1- /
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

RATE

X\$ 9=

X42=

+140=

ADDIT. FEE

ADDI-

TIONAL

FEE

ADDI-

TIONAL

FEE

RATE

X\$18=

X84=

+280=

ADDIT, FEE

TOTAL

FORM PTO-875 (Rev. 8/01)

\$10 € CPO 2001 462-124 / 251

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OR

OR

OR

OR